## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Reform America Fund	C C00581934
Check if X 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayayay
Full Name of Payee Nonbox	Date of Public Distribution/Dissemination
	10 24 2016
Mailing Address 5307 S 92nd St	Amount
City State Zip Code	10667.80
Hales Corners WI 53130-1677	Transaction ID : E9A00E4A59A1749948AE Date of Disbursement or Obligation
Purpose of Expenditure Media Production  Category/ Type	10 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
Feingold, Russ, , ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Nonbox	10 24 2016
Mailing Address 5307 S 92nd St	Amount
City State Zip Code	447296.00
Hales Corners WI 53130-1677	Transaction ID: E30EA0CC54A7146E7888
Purpose of Expenditure Media Buy  Category/ Type	Date of Disbursement or Obligation  10 20 2016
Type	
Feingeld Buss	e Sought: House District:
reiligoid, Russ, , ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	457963.80
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(b) Foraz masponacii Exponalarea	457963.80
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
	0 25 2016
Signature	